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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/712,919	
	Filing Date	November 12, 2003	
	First Named Inventor	Judith E. Schwabe	
	Art Unit	Unassigned	
	Examiner Name	Unassigned	
Total Number of Pages in This Submission	5	Attorney Docket Number	SUN-P8743

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Preliminary Amendment <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):		
<table border="1"><tr><td>Remarks</td><td></td></tr></table>			Remarks	
Remarks				

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	John P. Schaub, Reg. No. 42,125
Signature	
Date	12/30/03

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Carol Diez		
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Docket No. SUN-P8743
(811173-000333)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Judith E. Schwabe
SERIAL NO.: 10/712,918
FILING DATE: November 12, 2003
TITLE: OVERFLOW SENSITIVE ARITHMETIC INSTRUCTION
OPTIMIZATION USING CHAINING
EXAMINER: Unassigned
ART UNIT: Unassigned

CERTIFICATE OF MAILING

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Name: _____


Carol Diez

COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

PRELIMINARY AMENDMENT

Dear Sir:

Please amend the above-identified application as follows:

Amendments to the Specification begin on page 2 of this paper.

Remark/Arguments begin on page 3 of this paper.